

Patricia Booker

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO. 10/573297		FILING DATE					
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT			AS FILED		AFTER 1 st AMENDMENT		AFTER 2 nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1						51		1				
2		1					52	1					
3							53		1				
4							54	1					
5							55		5				
6							56		1				
7							57		4				
8							58		5				
9							59						
10							60	1					
11							61	1					
12							62		1				
13							63	1					
14							64	1					
15							65						
16							66						
17	1						67						
18							68	1					
19							69	1					
20							70		1				
21							71	1					
22							72		5				
23	1						73	1					
24	1						74	1					
25							75	1					
26							76		5				
27							77	1					
28							78		1				
29							79	1					
30							80		1				
31							81	1					
32							82	1					
33							83	1					
34							84	1					
35							85	1					
36							86		1				
37							87	1					
38							88		5				
39	1						89	1					
40		5					90	1					
41	1						91	1					
42							92	1					
43							93		1				
44							94		5				
45							95	1					
46							96	1					
47	1						97	1					
48							98						
49							99						
50		5					100						
TOTAL IND.	48						TOTAL IND.						
TOTAL DEP.	81						TOTAL DEP.						
TOTAL	129						TOTAL						